NAMI California Policy Statement DMH Reorganization

NAMI California supports the position of the creation of a new Department of Mental Health and Drug and Alcohol Services for all related <u>non-Medi-Cal services</u> and programs.

NAMI California believes that any reorganization of the State Department of Mental Health should provide individuals living with mental illness with services and supports that increase health and recovery outcomes across the life span, are culturally and linguistically competent, and are integrated and coordinated to provide linkage to needed treatment and services regardless of funding stream.

California should use this reorganization opportunity to truly integrate our Medi-Cal, **non**-Medi-Cal, and MHSA services to prioritize assistance to all Californians based on their severity of need.

As various reorganization proposals are discussed, NAMI California urges policy makers to answer the following questions:

- How will a reorganized Department of Health Care Services (Medi-Cal) and Department of Mental Health (non-Medi-Cal mental health) and increased localization ensure that children, youth, adults and older adults with the highest or most complex mental health needs are prioritized?
- How will reorganization ensure that a full array of services and supports are available, accessible, and culturally and linguistically appropriate throughout the state? In addition to traditional psychiatric services, an array of services should, at a minimum, include:
 - Housing with supportive services
 - Employment and education supports
 - Transportation services
 - Reduction in engagement with the criminal justice system
 - Wrap Around Services
 - Integrated mental health and substance use treatment
 - Prevention and outreach services
 - Case management and care coordination
 - Community skill building
- How can California prioritize services and supports by severity of need, rather than by source of funding?
- How can California facilitate decreased demand for state hospital beds and reduce rates of incarceration and re-hospitalization.

Any reorganization of California's mental health system can only be successful if it facilitates the coordination, integration, and linkage of Medi-Cal, non-Medi-Cal, and MHSA services. This integration must be accomplished in order to achieve positive outcomes for all persons living with serious mental illness.

To achieve this integration and coordination goal, NAMI California supports the position of the creation of a new Department of Mental Health and Drug and Alcohol Services for all related <u>non-Medi-Cal</u> services and programs.

State Hospital Care and Reorganization Proposals

Successful reorganization of mental health funding and functions should facilitate reduced demand (need) for state hospitalization, improved health and wellness outcomes for patients and fewer instances of re-hospitalization.

California will need to decide if:

- A new Department of State Hospitals be created under the Health and Human Services Agency;
- Or, the responsibility for the state hospital system remains within the domain of a new community-based mental health care department as described above.

NAMI California calls for a comprehensive review and analysis of the pros and cons of the above choices to determine the most appropriate placement of responsibility for California's state hospital services,. NAMI California does not support the transfer of state hospital responsibility for forensic patients to the Department of Corrections and Rehabilitation.

Senior Policy Advisor

- NAMI California believes any reorganization of California's mental health system can only be successful if it facilitates the coordination and linkage between Medi-Cal and **non-**Medi-Cal services and programs. This integration must be accomplished in order to achieve positive outcomes for all persons living with serious mental illnesses.
- Effective coordination and development of policy can only be accomplished at the highest level of California's health care system.
- NAMI California supports the concept of a senior policy advisor at the highest level of the Health and Human Services Agency.